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## \*BIBDATASHEET\*

CONFIRMATION NO. 6327

Bib Data Sheet

SERIAL NUMBER 10/078,056	FILING DATE 02/15/2002  RULE	CLASS 250	GROUP ART UNIT 2881	ATTORNEY DOCKET NO. 05513.P002
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *none PD*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none PD*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/12/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials	CA	10	50	7

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## TITLE

X-ray imaging device

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